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Debtor 1 Denise Ellen Bergsma	Check if this is:
Debtor 2	☐ An amended filing
(Spouse, if filing)	Chapter you are filing under:
United States Bankruptcy Court for the Western District of Michigan	☐ Chapter 7 ☐ Chapter 11
Case number	☐ Chapter 12 ☐ Chapter 13
(If known)	

## voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself	ŧ.	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
L.	Your full name	Denise	N/A
	Write the name that is on your	First name Ellen	First name
	government-issued picture identification (for example, your driver's license or	Middle name Bergsma	Middle name
	passport).	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years.	N/A First name	N/A First name
	-	I has realite	rust name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
		N/A	N/A
		First name	First name
		Middle name	Middle name
		Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)

Det	otor 1 Denise Ellen Bergsma				Case number
	error er en er er		mental and the second of the s		
<b>3.</b>	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XX	X-XX-7402	N//	A
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years.	N/	I have not used any business names or EINs  A	□ <u>N//</u>	The state of the s
:	•	NI		N/	
:	Include trade names and doing business as names.	_	iness name		siness name
:		<u>N//</u>	Α	N//	Α.
:		EIN	<del>_</del>	EIN	
		N//	Δ.	N/A	
		EIN		EIN	
1					
:	•				
5.	Where you live			If C	Debtor 2 lives at a different address:
		40	000 (6-4)		_
			399 Katherine Court	N//	
		Nun	nber Sueet	EIN	
			and Haven MI 49417		
			, State, Zip Code tawa		
		_	inty		
			•		
		abo	our mailing address is different from the one ove, fill it in here. Note that the court will send notices to you at this mailing address.		
		***			
		N/A	nber Street		
!		Nun	incer Sueer		
		City	, State, Zip Code		
_					
6.	Why you are choosing this district to file for	Che	eck one:	Che	eck one:
	bankruptcy	Ø	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	×	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
:			I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)
			N/A		N/A

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BKAssist® S

Р	art 2: Tell ti	ne Court Al	out	Your Ba	nkrupt	cy Case					
7.	Bankruptcy Co	de you are	Che Ban	ck one. (F kruptcy (F	or a brid orm B20	ef description of 010)). Also, go	f each, see <i>No</i> to the top of p	otice Rec age 1 ar	quired by 11 U.S.C. nd check the appro	. § 342(b) for In priate box.	dividuals Filing for
	choosing to file under		X	Chapter	7						
				Chapter	11						
				Chapter	12						
i				Chapter	13						
8.	How you will pa		local co	urt for n , you m ng your	nore details a ay pay with c payment on	bout how yo ash, cashier	u may p 's checl	n. Please check v pay. Typically, if y k, or money orde torney may pay v	/ou are payin r. If vour attoi	a the fee	
		×	I need t	o pay t	he fee in ins	tailments. If	you ch	oose this option, ents (Official For	sign and atta m 103A).	ch the <i>Application</i>	
				7. By laving is less the to pay the	v, a jud nan 150 ne fee ii	ge may, but is )% of the offic n installments	s not require ial poverty li ). If you cho	ed to, wa ine that ose this	uest this option o aive your fee, and applies to your fa option, you mus Form 103B) and f	d may do so d amily size and It fill out the A	pplication to
		-									
9.	Have you filed f		X	No							
	bankruptcy with last 8 years?	iin the		Yes	District	N/A		When	MM/DD/YYYY	_ Case number	
į					District !	N/A		When	MM/DD/YYYY	_ Case number	
					District	N/A		When	MM/DD/YYYY	_ Case number	
10.	Are any bankruj	otcv	⋈	No							
	cases pending of filed by a spous	or being		Yes	Debtor l	N/A				_ Relationship _	
!	not filing this case with you, or by a business partner, or by an affiliate?		_		•			When	MM/DD/YYYY	_ Case number	
					Debtor	M/Δ				Balationchia	
					District			When	MWDD/YYYY		
11.	Do you rent you residence?	r	<b>⊠</b>	No. Go t Yes. Has	your lar No. Go Yes. Fi	ndlord obtained to line 12.	tement About		against you?	nst You (Form	101A) and file it as

Case number:

Part	
rail	. Э.

Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

Part	4.	
E OU L	<b></b>	

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

 $\boxtimes$ No.

☐ Yes.

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180
days before I filed this bankruptcy petition,

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved
credit counseling agency within the 180
days before I filed this bankruptcy petition,
but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

Case number:

#### About Debtor 1:

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

ao so

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Pá	art 6: Answer These (	Quest	ions for Reporting Purpos	es			
16.	What kind of debts do you have?	16a	Are your debts primarily "incurred by an individual pri  No. Go to line 16b.  Yes. Go to line 17.	y con marily	sumer debts? Consumer deb for a personal, family, or housel	ots are hold p	e defined in 11 U.S.C. § 101(8) as surpose."
			Are your debts primarily money for a business or inve	stmer	siness debts? Business debts nt or through the operation of the	busir	ness or investment.
:		16c.	State the type of debts you o	we th	at are not consumer debts or bu	siness	s debts: N/A
17.	Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		No. I am not filing under Chapter Yes. I am filing under Chapter administrative expenses a  No.  ☐ Yes.	7. Do	Go to line 18.  you estimate that after any exendid that funds will be available to	npt pr distrit	operty is excluded and oute to unsecured creditors?
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-199 200-999		1,000 - 5,000 5,001 - 10,000 10,001 - 25,000		25,001 - 50,000 50,001 - 100,000 More than 100,000
19.	How much do you estimate your assets to be worth?		\$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million		\$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001, to \$100 million \$100,000,001 to \$500 million		\$500,000,001 to \$1 billion \$1,000,000,001 to \$10 billion \$10,000,000,001 to \$50 billion More than \$50 billion
20.	How much do you estimate your liabilities to be?		\$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million		\$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001, to \$100 million \$100,000,001 to \$500 million		\$500,000,001 to \$1 billion \$1,000,000,001 to \$10 billion \$10,000,000,001 to \$50 billion More than \$50 billion

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Part 7: Sign Below

#### For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Is/ Denise Ellen Bergsma

12/19/2018 MM/DD/YYYY

# For your attorney, if you are represented by one

Note that BkAssist is licensed for use only by attorneys. If you are not represented by an attorney, you may not file this petition. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Attorney for Debtor(s)

12/19/2018 MM/DD/YYYY

Roger G. Cotner

Printed name

Cotner Law Offices

Firm name

PO Box 838

Number Street

Grand Haven MI 49417

City, State, ZIP Code

616-846-7153

roger@cotnerlaw.us Email address

Contact phone P36569

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Fill in this information to identify your case:	
Debtor 1 Denise Ellen Bergsma  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the Western District of Michigan  Case number (If known)	Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pa	Part 1: Summarize Your Assets	
÷		Your assets Value of what you own
1.	. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	
	1b. Copy line 62, Total personal property, from Schedule A/B	\$17,471.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$122,471.00
Pa	Part 2: Summarize Your Liabilities	
1		<b>Your liabilities</b> Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 Schedule D	
3.	<ul> <li>Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F</li> </ul>	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$18,852.78
	Your tot	tal liabilities \$118,600.78
Pa	Part 3: Summarize Your Income and Expenses	
4.	. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,478.05
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J.	\$2,478.05

F	Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with schedules.  ☑ Yes	n your other
7.	What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9 for statistical purposes. 28 U.S.C. § 159  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check submit this form to the court with your other schedules.	9.
8.	From the Statement of Your Current Monthly Income (Official Form 122A-1, 122B, or 122C-1): Copy your total current monthly income from line 11	\$1,140.05
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
Fre	om Part 4 on <i>Schedule E/F</i> , copy the following:	Total claim
	9a. Domestic support obligations (Copy line 6a.)	\$0.00
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	
		\$1,310.00
	9d. Student loans. (Copy line 6f.)	\$1,310.00 \$0.00

Case number:

Debtor 1 Denise Ellen Bergsma

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Fill in this information to identify your case:	
Debtor 1 Denise Ellen Bergsma  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the Western District of Michigan  Case number (If known)  Official Form 106A/B	Check if this is an amended filing
Schedule A/B: Property	12/15
In each category, separately list and describe items. List an asset only once. If an asset the category where you think it fits best. Be as complete and accurate as possible. If tw	

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

No Coto Dont 2			
No. Go to Part 2. Yes. Where is the property?			
12399 Katherine Court Street address, if available, or other description	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured of Put the amount of any son Schedule D: Creditors W Secured by Property.	ecured claims on
Grand Haven MI 49417 City, State, ZIP Code	Land Investment property Timeshare	Current value of the entire property?	Current value of the portion you own?
County	N/A	\$105,000.00	\$105,000.00
I the dollar value of the portion yo	Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this item, such as local property identification number:  ou own for all of your entries from Part 1, i	(see instructions)	mmunity property \$105,000.00
	or Part 1. Write that humber nere.		11
s you own that someone else drives.	table interest in any vehicles, whether the If you lease a vehicle, also report it onSched	y are registered or not dule G: Executory Contra	? Include any acts and Unexpired
s, vans, trucks, tractors, sport uti	lity vehicles, motorcycles		
No. Yes.			
	12399 Katherine Court Street address, if available, or other description  Grand Haven MI 49417 City, State, ZIP Code  Ottawa County  I the dollar value of the portion yourses for pages you have attached to be compared by the county of the c	Street address, if available, or other description	12399 Katherine Court

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Deb	tor 1	Denise	Ellen Bergsma				Case number:
	3.1	Make: Model:	Chevy Cruze	one	Debtor 1 only Debtor 2 only	Do not deduct secure Put the amount of an Schedule D: Creditor Secured by Property	rs Who Have Claims
		7076	2016 mate mileage: 18,000		Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property	Current value of the entire property?	I the nortion you
		Other in	formation:		(see instructions)	\$13,250.0	0 \$13,250.00
4.					d other recreational vehicles, other vetercraft, fishing vessels, snowmobiles,		
5.	Add	d the do	llar value of the portion you o pages you have attached for	own Par	for all of your entries from Part 2, in t 2. Write that number here	cluding any	\$13,250.00
Pa	rt 3:	D	escribe Your Personal and H	lous	ehold Items		
Do	you luct se	I own or ecured clair	have any legal or equitable in sor exemptions)	nter	rest in any of the following items? (Lis	st the current value of the	portion you own. Do not
6.	Ho: Exa	usehold imples: Ma	goods and furnishings ajor appliances, furniture, linens, ch	nina,	kitchenware		
	☒	Yes (U	sual household goods, no si	ngle	e item worth more than \$500 \$2,000.0	00, D1)	\$2,000.00
7.	Exa	ctronics mples: Te ections; el		stere	eo, and digital equipment; computers, printe cameras, media players, games	rs, scanners; music	
		No Yes (T	wo Televisions \$100.00, D1);	(La	ptop \$50.00, D1)		\$150.00
8.	Exa	mples: Ar	s of value ntiques and figurines; paintings, pri ball card collections; other collectio	nts, c	or other artwork; books, pictures, or other ar nemorabilia, collectibles	t objects; stamp,	
	$\boxtimes$	No Yes					
9.	Exa	u <b>ipment</b> mples: Sp	for sports and hobbies	other	hobby equipment; bicycles, pool tables, gol		
	$\boxtimes$	No Yes					
10.		earms imples: Pi	stols, rifles, shotguns, ammunition,	and	related equipment		
	$\boxtimes$	No Yes					
11.		othes imples: Ev	veryday clothes, furs, leather coats,	des	igner wear, shoes, accessories		
		No Yes (U	sed Clothing \$100.00, D1)				\$100.00
12.	Exa	<b>velry</b> <i>mples:</i> Ev d, silver	veryday jewelry, costume jewelry, e	ngaç	gement rings, wedding rings, heirloom jewel	ry, watches, gems,	

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Deb	tor 1 Denise Ellen Bergsma	Case number:
i !	□ No Yes (Heirloom Jewelry - Mother's Ring \$100.00, D1)	\$100.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses	
	□ No ☑ Yes (Dog \$1.00, D1)	<b>\$1.00</b>
14.	Any other personal and household items you did not already list, including any health aids you did not list	
:	<ul><li>No</li><li>Yes</li></ul>	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$2,351.00
Pa	rt 4: Describe Your Financial Assets	· <del></del> · · · · · · · · · · · · · · · · · ·
Do sec	you own or have any legal or equitable interest in any of the following? (List the current value of the portion ured claims or exemptions)	n you own. Do not deduct
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	□ No ☑ Yes Pocket Cash \$80.00 (D1)	\$80.00
17.	Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
i	□ No  Yes Chase Checking Account \$1,231.00; Sole owner (D1)	<b>\$1,231.00</b>
	Honor Credit Union Share Account \$5.00 (D1)	\$5.00
18.	Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts	
	☑ No           ☐ Yes	\$0.00
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture	
	№         No           Tyes         Tyes	\$0.00
20.	Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
1	No	\$0.00
21.	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	: :
	□ No ☑ Yes MERS pension pays Debtor \$700.05 per month during her life. \$0.00 (D1)	
22.	Security deposits and prepayments  Your share of all unused deposits you have made so that you may continue service or use from a company.  Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	

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Deb	tor 1	De	nise Ellen Bergsma		Case number:
	⊠ □	No Yes	5	••••••	\$0.00
34.	Oth and	er c l rigl	ontingent and unliquidated claims of every nature, including counterclaims of th hts to set off claims	e debtor	
	⊠ □	No Yes	S		\$0.00
35.	Any	/ fina	ancial assets you did not already list		
!	×	No Yes	\$ ····································	**********	\$0.00
36.	Add	the iche	dollar value of all of your entries from Part 4, including any entries for pages your distribution of the	ou have	\$1,870.00
Pa	rt 5:		Describe Any Business-Related Property You Own or Have an Interest In. List	any real estate	in Part 1.
37.	Do ⊠ □	No.	own or have any legal or equitable interest in any business-related property? Go to part 6. s. Go to line 38.		
Pa	rt 6:		Describe Any Farm- and Commercial Fishing-Related Property You Own or Half you own or have an interest in farmland, list it in Part 1.	ave an Interest I	in.
46.		pert No.	own or have any legal or equitable interest in any farm- or commercial fishing-re y? Go to part 7. s. Go to line 47.	elated	
Pa	rt 7:		Describe All Property You Own or Have an Interest in That You Did Not List Al	bove	
53.		mple: No	have other property of any kind you did not already list? s: Season tickets, country club membership		\$0.00
54.			e dollar value of all of your entries from Part 7, including any entries for pages your distribution of the community of the		
Ра	rt 8:		List the Totals of Each Part of this Form		
55.	Par	t 1: '	Total real estate, line 2	······	\$105,000.00
56.	Par	t 2: <sup>-</sup>	Total vehicles, line 5	<u>\$13,250.00</u>	
57.	Par	t 3: '	Total personal and household items, line 15	\$2,351.00	
58.	Par	t 4: '	Total financial assets, line 36	\$1,870.00	
59.	Par	t 5: '	Total business-related property, line 45		
60.	Par	t 6: '	Total farm- and fishing-related property, line 52		
61.	Par	t 7: '	Total other property not listed, line 54		
62.	Tot	al pe	ersonal property. Add lines 56 through 61		\$17,471.00
63.	Tot	al of	all property on Schedule A/B. Add line 55 + line 62		\$122,471.00

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Fill in this information to identify your case:	
Debtor 1 Denise Ellen Bergsma	
Debtor 2	Check if this is:
(Spouse, if fiting)	☐ An amended filing
United States Bankruptcy Court for the Western District of Michigan	<ul><li>☑ Applicable to Debtor 1</li><li>☑ Applicable to Debtor 2</li></ul>
Case number(if known)	

#### Western District of Michigan Form 106C

# Schedule C: The Property You Claim As Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1:

Identify the Property You Claim as Exempt

- Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming MI state exemptions and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

    You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Am	ount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption		
12399 Katherine Ct Grand Haven, MI (Line 1)	\$105,000.00		\$19,835.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)		
Usual household goods, no single item worth more than \$500 (Line 6)	\$2,000.00	\$2,000.00 S2,000.00 100% of fair market value, up to any applicable statutory limit		11 U.S.C. § 522(d)(3)		
Laptop (Line 7)	\$50.00		\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Two Televisions (Line 7)	\$100.00	Ø	\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Used Clothing (Line 11) \$100.00		⊠ □	\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Heirloom Jewelry - Mother's Ring (Line 12)	\$100.00	×	\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)		

Case number:

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Am	ount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption	
Dog (Line 13)	\$1.00	⊠ □	\$1.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Pocket Cash (Line 16)	\$80.00		\$80.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Chase Checking Account (Line 17)	\$1,231.00		\$1,231.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Нолог Credit Union Share Account (Line 17)	\$5.00	⊠ □	\$5.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
2018 estimated tax refunds, prorated to date of filing (Line 28)	\$553.00		\$553.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Foresters Plan Right Basic Life Insurance: 5,000 Death Benefit (Line 31)	\$1.00		\$1.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)	
Total	\$109,221.00		\$24,056.00		

3.	Are you claiming a homestead exemption of more than \$160,375.00?
	(Subject to adjustment on 04/01/2019 and every 3 years after that for cases filed on or after the date of adjustment.)
	No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
	No
	☐ Yes

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Do not deduct the value that supports this if any of the collateral claim	Debtor 1 Denise Ellen Bergsma  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the Case number (If known)  Official Form 106D			☐ Check if filing	this is an amended
information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?	Schedule D: Credito	rs Who Have Claims :	Secured by	y Property	12/15
And a decident the value of collateral bon of deduct the value of collateral bon of deduct the value of collateral bon of deduct the value of the collateral bon of	information. If more space is needed, co additional pages, write your name and c  1. Do any creditors have claims secur  No. Check this box and submit to yes. Fill in all of the information to the part 1:  List All Secured Claim  List all secured claims. If a creditor is	py the Additional Page, fill it out, number the ase number (if known).  ed by your property? his form to the court with your other schedules below.  Is nas more than one secured claim, list the credi	he entries, and attaces.  You have nothing electric services.	th it to this form. Or its form this for the control of the contro	orm.
Contingent   Con			Column A Amount of claim Do not deduct the value	Column B Value of collateral that supports this	Column C Unsecured portion
Huntington Bank Mortgage Co  Creditor's Name 7575 Huntington Park Dr  Number Street  Columbus OH 43235  Coy, State, ZP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community  Large Matherine Ct Grand Haven, M1  As of the date you file, the claim is: Check of that apply Contingent Unliquidated Disputed  Nature of lien. Check at that apply An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	Monor Credit Union Crettor's Name 8385 Edgewood Road Number Street  Berrien Springs MI 49103 Cxy, Stace, ZIP Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Nature of lien. Check all that apply An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	•	\$13,250.00	\$1,333.00
	2.2 Huntington Bank Mortgage Co Creditor's Name 7575 Huntington Park Dr Number Street  Columbus OH 43235 Cay, State, ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community	As of the date you file, the claim is: Check at that apply Contingent Unliquidated Disputed  Nature of lien. Check at that apply An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	•	\$105,000.00	

\$99,748.00

Add the dollar value of your entries in Column A. Write that number here:

Debtor 1 Denise Ellen Bergsma Case number:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	Fill in this information to identify	y your case:			ļ		
	Debtor 1 Denise Ellen Bergsma						
	Debtor 2	-					
	(Spouse, if filing)	-		<del></del>			Check if this is an amended
ı	United States Bankruptcy Court for the	: Western District of (	Mich	nigan			filing
	Case number						
L	(If known)						
_	official Form 106F/F				_		
_	official Form 106E/F						
S	chedule E/F: Credi	itors Who I	Hâ	ave Unse	cured Claim	S	12/15
Lis A/E cre	e as complete and accurate as possib st the other party to any executory co B: Property (Official Form 106A/B) an editors with partially secured claims t eded, copy the Part you need, fill it or p of any additional pages, write your	ntracts or unexpired d on Schedule G: Ex that are listed in Scho ut. number the entrie	leas ecut edul es in	ses that could restory Contracts and le D: Creditors Williams the boxes on the	sult in a claim. Also list e nd Unexpired Leases (Off ho Hold Claims Secured	xecutor ficial Fo	ry contracts on <i>Schedule</i> rm 106G). Do not include any perty. If more space is
Р	art 1: List All of Your PRIO	RITY Unsecured C	lain	ns			
1.	Do any creditors have priority unse	cured claims agains	st yo	u?			
1	No. Go to Part 2.  Yes.						
<u>i_</u> -							
Ρ	art 2: List All of Your NONF	RIORITY Unsecur	ed (	Claims			
3.	Do any creditors have nonpriority on No. You have nothing to report in Yes.				your other schedules.		
4.	List all of your nonpriority unsecur priority unsecured claim, list the credi already included in Part 1. If more tha unsecured claims fill out the Continua	itor separately for each an one creditor holds a	ı cla	im. For each claim	ı listed, identify what type o	of claim	it is. Do not list claims
							Total claim
4.1			Las	t 4 digits of account r	number: -6PA0		\$1,310.00
	nerican Education Services priority Creditor's Name	•	Whe	en was the debt incu	rred: <b>03/2007</b>		
$\overline{}$	Box 61047	•	Asc	of the date you file, th	ne claim is: Check at that apply		
		,		Contingent Unliquidated			
	rrisburg PA 17106	•	ᆸ	Disputed			
Wh	, Same, ZIP Code to incurred the debt? Check one.		Тур	e of NONPRIORITY	unsecured claim:		
日	Debtor 1 only		Ø	Student loans Obligations arising	out of a separation agreemen	t or disor	ce that
Ħ	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset?			you did not report a	as priority claims		
M	At least one of the debtors and another Check if this claim is for a community debt		H	Debts to pension o Other. Specify	r profit-sharing plans, and other	er sımilar	debts
js t	the claim subject to offset?		_				
	No Yes						

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Debtor 1 Denise Ellen Bergsma		Case number:
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		Total claim
4.2 Capital One	Last 4 digits of account number: -9146	\$3,065.07
Nonpriority Creditor's Name	When was the debt incurred: 04/2009	
PO Box 30285 Number Street	As of the date you file, the claim is: check as that apply Contingent Unliquidated	
Saft Lake City UT 84130  Cty, State, 20 Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	□ Disputed  Type of NONPRIORITY unsecured claim:     □ Student loans     □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims     □ Debts to pension or profit-sharing plans, and other similar debts     ○ Other. Specify Credit Card	
No Yes		
4.3 Capital One	Last 4 digits of account number: -0091	\$5.00
Nonpriority Creditor's Name PO Box 5253	When was the debt incurred: 01/2006	
Number Street  Carol Stream IL 60197	As of the date you file, the claim is: Check an that apply Contingent Unliquidated Disputed	
City, State, ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card	
4.4 Citizens Bank	Last 4 digits of account number: -0982	\$6,979.00
Nonpriority Creditor's Name	When was the debt incurred: 11/21/2016	
PO Box 7092 Number Street  Bridgeport CT 05601	As of the date you file, the claim is: Check at that apply Contingent Unliquidated Disputed	
City, State, ZP Code Who Incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Personal Loan	
4.5	Last 4 digits of account number: -5551	\$1,936.89
FNB OMAHA Nonpriority Creditor's Name	When was the debt incurred: 07/2008	
1620 Dodge Street Number Street Omaha NE 68197	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	
Chy, State, ZP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset?  No Yes	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	

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4.6 North Ottawa Community Health System Nonpromy Credio's Name Dept 4030 Number Street		Last -	4 digits of account number: -68**		
Nonpriority Creditor's Name Dept 4030 Number Street	•		a agita of account flamberco		\$682.54
Number Street		Whe	n was the debt incurred: 01/26/201	7	
PO Box 30516	•	As of	the date you file, the claim is: check Contingent	k all that apply	
Lansing MI 48909	•		Unliquidated Disputed		
Check if this claim is for a community debt  Is the claim subject to offset?		_	of NONPRIORITY unsecured cla Student loans Obligations arising out of a separa you did not report as priority claim Debts to pension or profit-sharing Other. Specify Medical	ation agreement or divorce that	
4.7		Last 4	4 digits of account number: -68**		\$78.28
North Ottawa Community Health System Nonpromy Creditor's Name		Wher	n was the debt incurred: 05/03/201	8	
Dept 4030 Number Street PO Box 30516		As of	the date you file, the claim is: check Contingent Unliquidated	k all that apply	
Lansing MI 48909 Chy, State, 20º Code		H	Disputed		
Who Incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No Yes	<b>◆</b>	Type	of NONPRIORITY unsecured cla Student loans Obligations arising out of a separa you did not report as priority claim Debts to pension or profit-sharing Other. Specify Medical	ation agreement or divorce that	
4.8 SST/Medallion		Last 4	4 digits of account number: 2944		\$4,796.00
Nonprorty Credtor's Name 4315 Pickett Road		Wher	was the debt incurred: 09/2014		
Number Street			the date you file, the claim is: check Contingent	k all that apply	
Saint Joseph MO 64503			Unliquidated Disputed		
Chy, State, ZIP Code Who incurred the debt? Check one.			of NONPRIORITY unsecured cla	ាំភាះ	
Debtor 1 only Debtor 2 only		8	Student loans Obligations arising out of a separa		
Debtor 1 and Debtor 2 only At least one of the debtors and another			you did not report as priority claim Debts to pension or profit-sharing	plans, and other similar debts	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes		M	Other. Specify Home Improveme	nt Loan	
Part 3: List Others to Be Not	ified for a Debt T	hat Yo	ou Already Listed		<u> </u>
<ol> <li>Use this page only if you have othe example, if a collection agency is to then list the collection agency here the additional creditors here. If you this page.</li> </ol>	rying to collect from a. Similarly, if you h	n you 1 ave m	for a debt you owe to someo ore than one creditor for any	ne else, list the original creditor i of the debts that you listed in Pa	n Parts 1 or 2, irts 1 or 2, list
1			On which entry in Part 1 or	Part 2 did you list the original creditor?	
H.E.L.P. Financial Corporation  Creditor's Name			Line 4.6 of (Check one):	Part 1: Creditors with Priority Unser	cured Claims
PO Box 33779			<del></del>	Part 2: Creditors with Nonpriority U	nsecured Claims
Number Street			Last 4 digits of account nu	mber:	
Detroit MI 48232					
City, State, ZIP Code					

Debtor	1	Denise	Ellen	Bergsma
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2		On which entry in Part 1 or	r Part 2 did you li	ist the original credi	itor?
	ncial Corporation	Line 4.7 of (Check one):	□ Part 1: Cre	ditors with Priority	Insecured Claims
Creditor's Name PO Box 3377	9	Elife 4.7 of Coneck Oney.			rity Unsecured Claims
Number Street		Last 4 digits of account nu	mber:		
Detroit MI 48	232	•			
City, State, ZIP Co	de	•			
3		On which entry in Part 1 or	r Part 2 did you li	st the original credi	itor?
National Coll Creditor's Name		Line 4.1 of (Check one):	Part 1: Cre	ditors with Priority ditors with Nonprio	Unsecured Claims rity Unsecured Claims
1200 N 7th S Number Street	reet	Last 4 digits of account nu	mber:		
Harrisburg P	A 17102	_			
City, State, ZIP Co	de	•			
Part 4:	Add the Amounts for Each Type of Unsecured	Claim	·•		
6. Total the Add the	amounts of certain types of unsecured claims. This in amounts for each type of unsecured claim.	formation is for statistica	al reporting pu	ırposes only. 28	3 U.S.C. §159.
				Total	claim
Total claims from				_	
Part 1	6a. Domestic support obligations	***************************************	*****************	6a	\$0.00
	6b. Taxes and certain other debts you owe the govern	ment		6b	\$0.00

claims from Part 1	6a. Domestic support obligations	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here	6d.	\$0.00
1.	6e. Total Add lines 6a through 6d	6e.	\$0.00
Total claims from Part 2	6f. Student loans	6f.	\$1,310.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here	6i.	<u>\$17,542.78</u>
	6j. Total. Add lines 6f through 6i.	6j.	\$18,852.78

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Fill in this information to identify your case:	
Debtor 1 Denise Ellen Bergsma  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the Western District of Michigan  Case number (If known)	Check if this is an amended filing

#### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?

  No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

  Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

1.	Do you have any codebtors? (If you are filing a joint o ☐ No ☑ Yes	case, do not list either spouse as a codebtor.)
<b>2.</b>	Within the last 8 years, have you lived in a commur territories include Arizona, California, Idaho, Louisiana, № No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equ № No	nity property state or territory? (Community property states and Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconivalent live with you at the time?  you live? . Fill in the name and current address of that person.
3. <i>Co</i>	the person shown in line 2 again as a codebtor only	de your spouse as a codebtor if your spouse is filing with you. y if that person is a guarantor or cosigner. Make sure you have thedule EIF (Official Form 106EIF), or Schedule G (Official Form G to fill out Column 2.  Column 2: The creditor to whom you owe the
1		Check all schedules that apply
3.1	Andrew Bergsma  Name 2500 Pepperwood Street  Number Street	□ Schedule D, line □ Schedule E/F, line 4.1 □ Schedule G, line
	#422	

Fill in this information to identify your case:

United States Bankruptcy Court for the Western District of Michigan

**Schedule H: Your Codebtors** 

Denise Ellen Bergsma

Debtor 1

Debtor 2 \_\_\_\_\_(Spouse, if filing)

(If known)

Official Form 106H

Check if this is an amended

12/15

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Fill in this information to identify your case:	
Debtor 1 Denise Ellen Bergsma  Debtor 2 (Spouse, if fiting)  United States Bankruptcy Court for the Western District of Michigan  Case number (If known)	Check if this is: An amended filing A supplement showing post-petition chapter 1: income as of

#### Official Form 1061

# Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment		Debtor 1	Debtor 2 or non-filing spouse
information  If you have more than one job,	Employment status	☐ Employed ☑ Not employed	☐ Employed ☐ Not employed
attach a separate page with information about additional	Occupation Employer's name	Retired N/A	N/A
employers.	Employer's address	N/A	N/A
Include part-time, seasonal, or self-employed work.	How long employed there?	N/A	N/A
Occupation may include student o homemaker, if it applies.	r		

Part 2:

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Including your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		Fo	r Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	
3.	Estimate and list monthly overtime pay.	3.	\$0.00	
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	
5.	List All payroll deductions:			
:	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	

Official Form 106I Schedule I: Your Income Page 1

Case number:

				For Debtor 1	For Debtor 2 or non-filing spouse
:	5c.	Voluntary contributions for retirement plans	5c.	\$0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$0.00	
	5e.	Insurance	5e.	\$0.00	
;	5f.	Domestic support obligations	5f.	\$0.00	
İ	5g.	Union dues	5g.	\$0.00	
1	5h.	Other deductions. Specify:	5h.	\$0.00	
6.	Add	the payroll deductions. Add lines 5a through 5h	6.	\$0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	
8.	List	all other income regularly received:			
	8a.	Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			
	8b.	Interest and dividends	8b.	\$0.00	
;	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			
	8d.	Unemployment compensation	8d.	\$0.00	
:	8e.	Social Security	8e.	\$1,338.00	
į	8f.	Other government assistance that you regularly receive	8f.	\$0.00	
1		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			
	8g.	Pension or retirement income	8g.	\$700.05	
:	8h.	Other monthly income. Specify: Renter D1 \$440.00	8h.	\$440.00	·
9.	Add	all other income. Add lines 8a-8h.	9.	\$2,478.05	•
10.		culate monthly income. Add line 7 + line 9. I the entries in line 9 for Debtor 1 and Debtor 2 or non-filing spouse.		10. \$2	2,478.05
11.		te all other regular contributions to the expenses that you list in Schedule J icial Form 106J).		11.	\$0.00
i		ude contributions from an unmarried partner, members of your household, your endents, your roommates, and other friends or relatives.			
		not include any amounts already included in lines 2-10 or amounts that are not available to expenses listed in <i>Schedule J</i> (Official Form 106J).			
1	Spa	cify:			
12.	write	If the amounts on lines 10 and 11. The result is the combined monthly income. Also be that amount on the Summary of Your Assets and Liabilities and Certain Statistical Amation (Official Form 106Sum) if it applies.		12.	2,478.05

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D	eptor 1	L Denise Ellen	Bergsma	Case numbe	ır:
1	3. Do	you expect an	increase or decrease within the year after you file this form?		
		No Yes. Explain	Debtor's Social Security will increasy by 2.8% starting January 2019.		

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	Fill in this information to identify your case:		
	Debtor 1 Denise Ellen Bergsma		
ı	Debtor 2	Che	ck if this is:
	(Spouse, if filing)		An amended filing A supplement showing
	United States Bankruptcy Court for the <u>Western District of Michigan</u>		post-petition chapter 13
	Case number		expenses as of
	(If known)		
O	ficial Form 106J		
	chedule J: Your Expenses		40145
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info	as complete and accurate as possible. If two married people are filing together, both are equally respons irmation. If more space is needed, attach another sheet to this form. On the top of any additional pages, which is the complete of t	ible fo write y	or supplying correct your name and case
	Trt 1: Describe Your Household		
1.	Is this a joint case?		
	No. Go to line 2. Yes. Does Debtor 2 live in a separate household?		
	No. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2		
2.	Do you have dependents?  Dependent's Dependent's age	e	Does dependent live
	No relationship to Debtor  Do not list Debtor 1 or Debtor 2. □ Yes. Fill out this 1 or Debtor 2		with you?
	information for Do not state the dependents' each dependent names.		
3.	Do your expenses include expenses of people other than yourself and your dependents?		
Pá	Estimate Your Ongoing Monthly Expenses		
ex	timate your expenses as your bankruptcy filing date unless you are using this form as supplement in penses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box a applicable date	n a Ch at the	napter 13 case to report e top of the form and fill in
	clude expenses paid for with non-cash governmental assistance if you know the value of such assist thedule I: Your Income(Official Form 106I).	ance	and have included it on
	ote: Expenses for property other than the debtor(s)' primary residence(s), if any, are reported in the Summary of t pense annexed to Schedule I.	Busine	ess/Real-Estate Income &
			Your expenses
4.	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.	4.	\$758.70
	If not included in line 4:		
1	4a. Real estate taxes	4a.	
1	4b. Property, homeowner's, or renter's insurance	4b.	\$44.00

4c. Home maintenance, repair, and upkeep expenses

\$60.00

4c.

Debtor 1 Denise Ellen Bergsma

Case number:

Page 2

			Your expenses
	4d. Homeowner's association or condominium dues	4d.	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$302.00
	6b. Water, sewer, garbage collection	6b.	\$25.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$118.00
	6d. Other. Specify: N/A	6d.	
7.	Food and housekeeping supplies	<b>7.</b>	\$250.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$5.00
10.	Personal care products and services	10.	\$10.00
11.	Medical and dental expenses	11.	\$50.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$52.35
13.	Entertainment, clubs, recreation, newspapers, magazine, and books	13.	\$20.00
14.	Charitable contributions and religious donations	14.	\$10.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$45.00
	15b. Health insurance	15b.	\$75.00
	15c. Vehicle insurance	15c.	\$96.00
	15d. Other insurance. Specify: N/A	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: N/A	16.	
17.	Installment or lease payments		
	17a. Car Loan (2016 Chevy Cruze)	17a.	\$200.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I (Official Form 106I)	18.	
19.	Other payments you make to support others who do not live with you. Specify: N/A	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I (Official Form 106I)		
	20a. Mortgages on other property	20a.	
į	20b. Real estate taxes	20b.	
	20c. Property, homeowner's, or renter's insurance	<b>20c.</b>	
	20d. Maintenance, repair, and upkeep expenses	20d.	
	20e. Homeowner's association or condominium dues	20e.	
	20f. Other. Specify:	<b>20f.</b>	

Case number:

			Your expenses
21.	Other. Specify:	21.	
	Car Registration		\$10.00
1	Car Cleaning		\$10.00
:	Dog vet bills, food, etc		\$93.00
	Lawncare and Snowplowing		\$60.00
	Roof snow removal/tree removal		\$10.00
	Furnance		\$174.00
22.	Calculate your monthly expenses.		
	22a. Add lines 4 through 21.	22a.	\$2,478.05
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	
:	22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$2,478.05
23.	Calculate your monthly net income		
	23a. Copy line 12 (your combined monthly income) from Schedule I	23a.	\$2,478.05
	23b. Copy your monthly expenses from line 22 above.	23b.	\$2,478.05
:	23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income	23c.	
24.	Do you expect an increase or decrease in your expenses within the year after you file this form?	_	
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgabecause of a modification to the terms of your mortgage?	ge payment	to increase or decreas
1	No Yes. Explain		

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Fi	Il in this information to identify your case:	
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0.000	se numberknown)	
Offi	cial Form 106Dec	

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?		
No Yes. Name of person NIA. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		
Is/ Denise Ellen Bergsma Denise Blygsma Signature of Debtor 1	12/19/2018 Date	
Signature of Debtor 2	12/19/2018 Date	

Case:18-05241-jwb Doc #:1 Filed: 12/19/18 Page 32 of 34

# United States Bankruptcy Court Western District of Michigan Grand Rapids Division

In re: Bergsma, Denise

Case No.

#### **Verification of Creditor Matrix**

I(we), hereby declare, under penalty of perjury, that the attached list of creditors is true and correct to the best of my(our) knowledge.

Isl Roger G. Cotner

Roger G. Cotner (P36569), Attorney for the Deptor(s)

PO Box 838

Grand Haven, MI 49417 Tel.: 616-846-7153 Fax: 616-846-5368

e-mail: roger@cotnerlaw.us

2/10/2019

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American Education Services Po Box 61047 Harrisburg, PA 17106

Andrew Bergsma 2500 Pepperwood Street #422 Farmers Branch, TX 75234

Capital One PO Box 30285 Salt Lake City, UT 84130

Capital One PO Box 5253 Carol Stream, IL 60197

Chex Systems, Inc. 7805 Hudson Road, Suite 100 Saint Paul, MN 55125

Citizens Bank VAM 110 10561 Telegraph Road Glen Allen, VA 23059

Equifax P.O. Box 740241 Atlanta, GA 30374

Experian Information Solutions P.O. Box 1240 Allen, TX 75013

FNB OMAHA 1620 Dodge Street Omaha, NE 68197

H.E.L.P. Financial Corporation PO Box 33779 Detroit, MI 48232 Honor Credit Union 8385 Edgewood Road Berrien Springs, MI 49103

Huntington Bank Mortgage Co 7575 Huntington Park Dr Columbus, OH 43235

Internal Revenue Service Centralized Insolvency Operation P. O. Box 7346 Philadelphia, PA 19101-7346

National Collegiate Trust 1200 N 7th Street Harrisburg, PA 17102

North Ottawa Community Health System Dept 4030 PO Box 30516 Lansing, MI 48909

SST/Medallion 4315 Pickett Road Saint Joseph, MO 64503

State of Michigan Treasury Building Lansing, MI 48922

TransUnion P.O. Box 2000 Crum Lynne, PA 19022